State : \_alifornia—Libulth and Welfare Agency Fo in Approved CMB No. 2050—0039 (Expires 9-30-91) Department of Health Services Toxic Substances Control Division Sacramento, California See Instructions on Back of Page 6 Pleas print . and Front of Page 7 ne. (Form designed for use on elite (12-pitch typewriter) CRM HAZARDOUS 1. Generator's US EPA ID No. Manifest 2. Page 1 Information in the shaded areas STE MANIFEST Document No. 814 | 85 | 19 CAD 981 387 988 is not required by Federal law. 3. Generator's Name and Mailing Address A. State Manifest Document Number COLUMBIA SHOWCASE 11034 Sherman Way, Sun Valley, B. State Generator's ID 4. Generator's Phone (213) 875-1210 5. Transporter 1 Company Name US EPA ID Number D. Transporter's Phone OMEGA RECOVERY 042 |245| 001 7. Transporter 2 Compa 8. US EPA ID Number E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number G. State Facility's ID OMEGA RECOVERY SERVICES CIAIDIO 14 BLOCKY LSTOID I 12504 E. Whittier Blvd. Whittier, Ca. 90602 042 245, 001 698-0991 12. Containers 13. Total 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 14. Unit Quantity Waate No. No. Туре State Waste Methyl HETHYL KETONE, FLAMMABLE LIQUID 212 EPA/Other GENERATOR (Methyl Ethyl Ketone, Waste Water, UN1993 F003 State EPA/Ciher State EPA/Other d. State EPA/Other RESPONSE J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above a. Material to be disposed b. C. d. THE NATIONAL 15. Special Handling Instructions and Additional Information Profile #B10233 \*Emergency#(213) 875-1210 CALL 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. OR SPILL, If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. AN EMERGENCY : .inted (Typed Name Signature Month Day Year RANSPORTE Printed Typed Name Signature Month Day Year Ę. IER ERNANDE 18. Transporter 2 Acknowledgement of Receipt of Materials CASE Printed/Typed Name Signature Day 19. Discrepancy Indication Space ACI, 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Day Year

Do Not Write Below This Line

EFA 8700--22 (Rev. 9-88) Previous editions are obsolete.

DHS 8022 A (1/88)

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS